

Scott County Delivers Emergency Preparedness February 18, 2020



Panel Representatives:

Scott Haas	Director of Emergency Management and 911 Communications
Lisa Brodsky	Public Health Director
Alexa Rundquist	Public Health Emergency Preparedness Coordinator
Kate Sedlacek	Environmental Services Manager
Cara Madsen	Volunteer and Community Coordinator

Results Map: Safe - Enforce laws, be prepared, and respond to emergency situations

Scott County Board Objective/Strategy:

Enhance the safety of residents by ensuring efforts that prepare residents and communities for emergencies

What goal are you trying to accomplish?

Incident stabilization, preservation of life, preservation of property, restoration to the “new” normal;
A ready to respond community and county

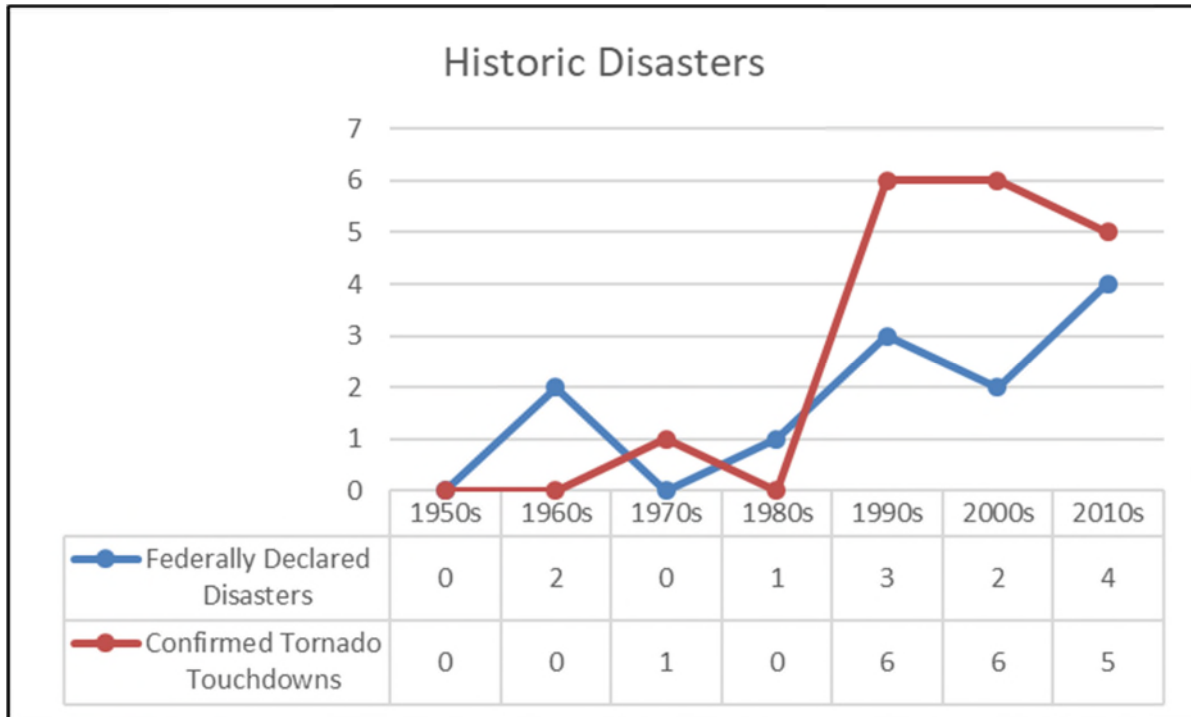
Background:

Emergency management is the discipline of preparing for disruptions of normalcy in the community. Modern day Emergency Management evolved from the civil defense movement of the 50's to an all hazard approach mandated in the early 2000's. Disruptions can be wide ranging including those by natural hazards, such as tornadoes, floods, and wind events, and those that are manmade including acts of neglect like a hazardous materials leak, to civil unrest and terrorism. Demands placed on Emergency Management continue to expand as lessons learned from natural and manmade emergencies around the county have identified the need for additional preparation and coordination activities. Emerging legal cases have confirmed liability for agencies having jurisdiction when the planning failures are identified.



Effective emergency management spans all aspects of government and community. As citizens are becoming more reliant on government, the challenge of preparing citizens to be self-sufficient during a crisis is equally as important as preparing government to function through a crisis. Effective emergency management establishes partnerships with other government agencies, the faith and nonprofit community, and private sector organizations. The priorities are to preserve life, preserve property, and return to normal.

Historic Disasters



Incident Type	Incident Period
Severe Winter Storm, Straight-Line Winds and Flooding	3/12/19 – 4/28/19
Severe Storms, Straight-Line Winds, Flooding, Landslides, Mudslides	6/11/14 – 7/11/14
Severe Storm, Flooding	3/16/11 – 5/25/11
Flooding	3/1/10 – 4/26/10
Flooding	3/23/01 – 7/3/01
Severe Storms, Straight-Line Winds, Tornadoes	5/15/98 – 6/28/98
Severe Storms, Flooding	3/21/97 – 5/24/97
Flooding, Severe Storm, Tornado	5/6/93 – 8/25/93
Flooding, Severe Storm, Tornado	7/20/87 – 8/5/87
Flooding	4/18/69
Flooding	4/11/65

Notes: Data provided by FEMA Region V on March 4, 2019; MN HSEM on December 10, 2014; and <https://www.fema.gov/media-library/assets/documents/28331>; accessed on September 10, 2019. Values are estimates collected at the time of the disaster.

Historic Tornado Events

Location	Date	Magnitude
Belle Plaine Township	7/15/19	EFO
Prior Lake	8/16/17	EFO
New Prague	8/16/17	EFO
Blakeley	6/10/12	EFO
St. Patrick	6/26/10	EFO
Belle Plaine	8/3/02	F0
New Market	6/11/01	F1
Belle Plaine	5/9/01	F0
New Prague	5/9/01	F0
New Market	5/9/01	F0
Blakeley	7/30/99	F0
Belle Plaine	7/30/99	F1
Lydia	7/30/99	F0
Savage	6/5/99	F0
Savage	8/22/98	F0
Lydia	7/21/95	F1
Scott County	5/21/77	F2

Source: National Climate Data Center

What is an Emergency?

An emergency is any unplanned event that can cause deaths or significant injuries to the public; or that can disrupt operations, cause physical or environmental damage, or threaten the financial standing of businesses and institutions. Obviously, numerous events can be "emergencies," including: wildfires, hazardous materials incidents, floods or flash floods, tornadoes, winter storms, public transportation, or electricity failures, radiological accidents, civil disturbances, terrorism, war, bioterrorism and disease outbreaks. According to the Metro Region's Threat and Hazard Identification and Risk Assessment (THIRA) (2016), Scott County's Top 10 Risks are:

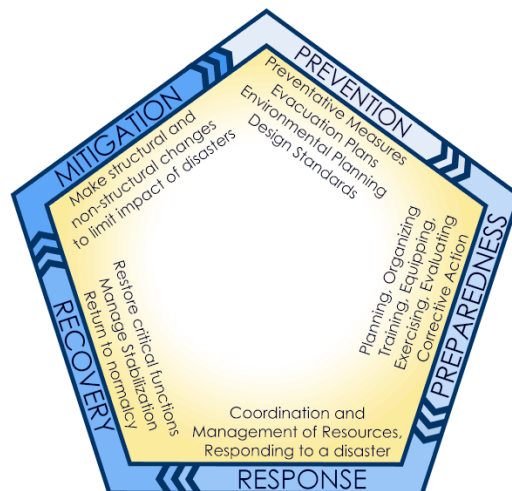
Threat	Rank
Tornadoes	1
Flash Flood	2
Cyber Security	3
Landslides	4
High Wind	5
Severe Winter Storms	6
Active Shooter	7
River Floods	8
Transportation- Hazardous Materials	9
Civil Unrest	10

Since the 2018 Scott County Delivers session, all these threats have occurred in Scott County except for an Active Shooter/Hostile Event.

Public Health hazards are not included in the THIRA. Public health has identified their top threats to include: infectious disease outbreaks, bioterrorism, and severe weather.

The Five Stages of Emergency Management:

Emergency Preparedness is a continuous cycle of process improvement. It is an important organizational tool that is comprised of five phases of: preparedness, prevention, response, recovery and mitigation. These phases describe a continuous cycle of planning, organizing, training, equipping, exercising and evaluating emergency preparedness activities and allows organizations to increase their overall capacity and resiliency to experience and recover from any type of disaster. The Preparedness Cycle allows organizations to create organization wide strategies to plan for disasters well ahead, so that they are prepared for any type of disaster, manmade or otherwise. Not all disasters can be prevented but through proactive planning efforts, the Preparedness Cycle can be an effective mechanism to plan and mitigate the risk of life and loss during a disaster.



The Emergency Management Role

Emergency Management, a division of the Sheriff's Office, is the local partner to the Federal Emergency Management Agency (FEMA), the Department of Homeland Security (DHS), and Minnesota Department of Homeland Security and Emergency Management (HSEM). Emergency Management is tasked with an all hazards approach to emergency prevention, asset protection, risk mitigation, response capabilities, and recovery. The Emergency Management Division maintains Scott County's Emergency Operations Plan (EOP) as well as multiple hazard specific plans such as debris management and pet sheltering (the federal PETS act requires that we open and maintain a pet shelter any time a shelter for humans is opened). In the event of a disaster, the Emergency Management Division is responsible for managing disaster operations, managing Emergency Operations Center (EOC) operations, coordinating operations of external partners, and conducting liaison operations with state HSEM and FEMA staff. The Emergency Management Division is responsible to coordinate the emergency management process for all municipalities within Scott County.

To evaluate Scott County's Emergency Management programs, the Emergency Management division of the Sheriff's Office utilizes the DHS and FEMA's thirty-two core capabilities to evaluate our capacity against the nationally standards.

	Federal Emergency Management Agency's 32 Core Capabilities				
	PREVENT	PROTECT	MITIGATE	RESPOND	RECOVER
Cross Cutting Capabilities	Planning				
	Public Information and Warning				
	Operational Coordination				
	Intelligence and Information Sharing		Community Resilience		Infrastructure Systems
	Interdiction and Disruption		Long-term Vulnerability		Critical Transportation
	Screening, Search and Detection		Reduction		Economic Recovery
	Forensics and Attribution		Risk and Disaster Resilience		Environmental Response/ Health and Safety
	Access Control and Identity Verification		Assessment		Health and Social Services
					Fatality Management Services
					Housing
			Cybersecurity		Fire Management and Suppression
			Threats and Hazard Mitigation		Natural and Cultural Resources
					Logistics and Supply Chain Management
					Mass Care Services
					Mass Search and Rescue Operations
					On-scene Security, Protection and Law Enforcement
					Operational Communications
					Public Health, Healthcare, and Emergency Medical Services
					Situational Assessment

Legend: Capabilities that are bolded indicate progress has been made since last Scott County Delivers;
Green indicates meeting; red indicates not meeting

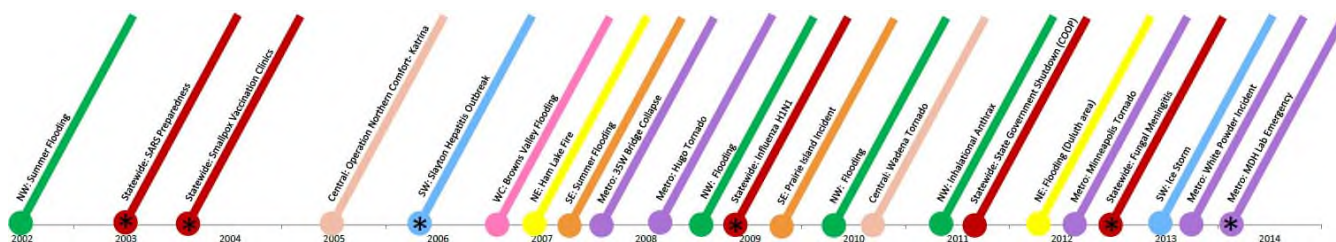
The Public Health Role

Communities must be ready to respond to emergencies – both those they expect and those that come without warning. The terrorist and anthrax attacks of 2001 clearly demonstrated the need for expertise and resources in place before disaster strikes. Since 9/11, the CDC's Public Health Emergency Preparedness Program has partnered with states to prepare and plan for emergencies.

Public health emergency preparedness (PHEP) is the capability of the public health and health care systems, communities, and individuals, to prevent, protect against, quickly respond to, and recover from health emergencies, particularly those whose scale, timing, or unpredictability threatens to overwhelm routine capabilities. Preparedness involves a coordinated and continuous process of planning and implementation that relies on measuring performance and taking corrective action.

PHEP should include a full range of prevention, mitigation, and recovery activities, not just those designed to enable responses to events. It also involves *operational* capabilities—the ability to quickly execute preparedness tasks. Although possessing capabilities requires capacity (infrastructure, personnel, plans, and so on) capacity alone does not ensure readiness. PHEP is not a steady state; it requires continuous improvement, including frequent testing of plans through drills and exercises and the formulation and execution of corrective action plans. PHEP also includes the practice of improving the health and resiliency of communities.

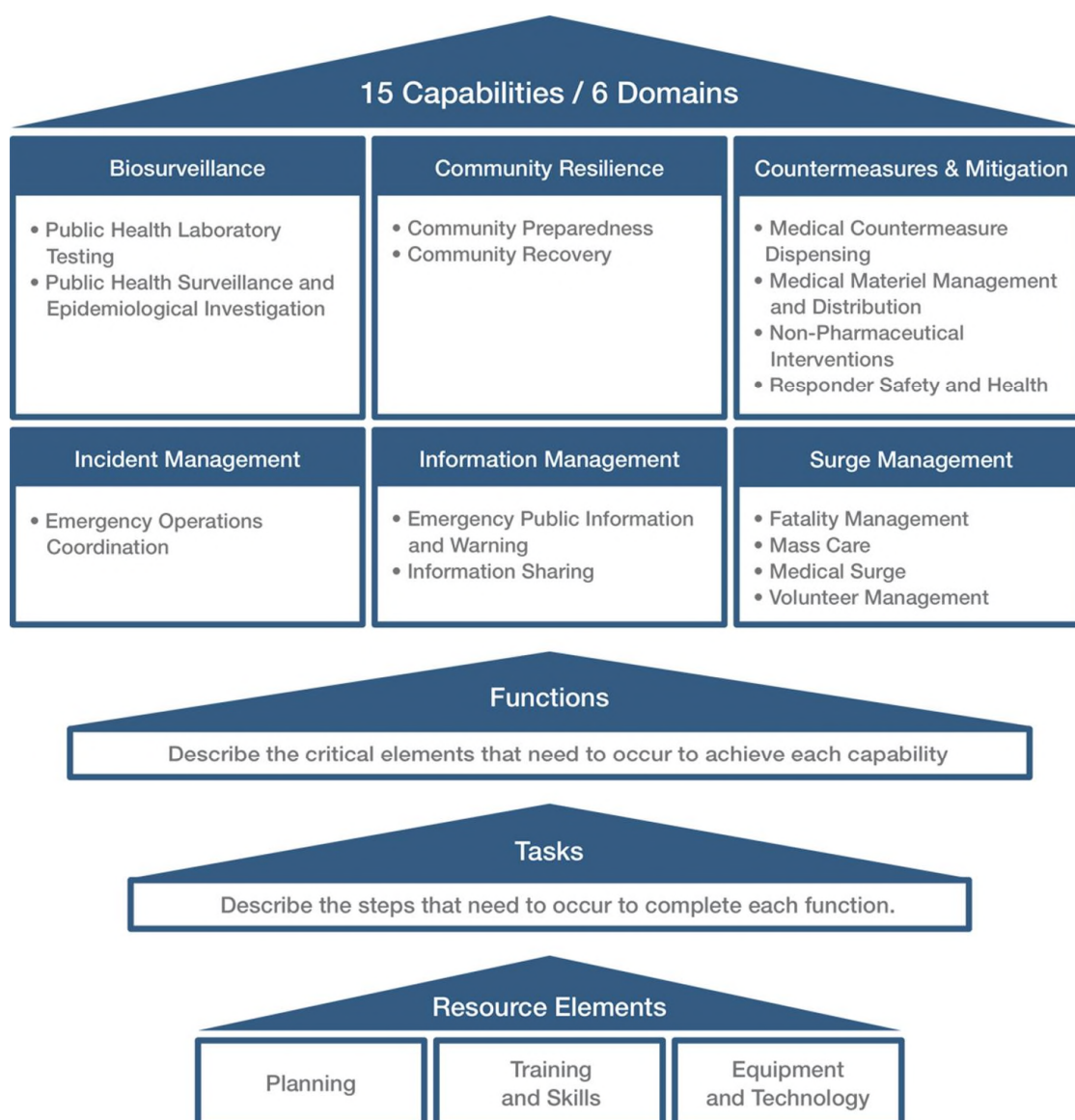
Between 2002 - 2014, there have been many emergencies throughout the State of Minnesota that had a public health response component.



NOTE: A larger version of this chart is located on page 13.

Since that time, we have had a multitude of public health threats including Ebola, measles, multi-drug resistant tuberculosis, syphilis, excessive heat, lead exposure, cryptosporidiosis, and many others. Local public health staff work daily to prevent infectious disease outbreaks and develop a response should one occur. Additionally, they work to increase the resiliency of the community so they are better able to withstand, manage and recover from emergencies and disasters.

The PHEP Capabilities document is organized under six domains that contain 15 capabilities. Each capability includes a definition of the capability and list of the associated functions, performance measures, tasks, and resource considerations.



Scott County Volunteers active in a disaster

The **Scott County Volunteer Coordinator** manages, coordinates, and prioritizes volunteers to meet the needs of the impacted area following a disaster or other incident of significance. The Volunteer Coordinator coordinates all unaffiliated volunteer activity and will evaluate and analyze information regarding volunteer requests. Additionally, the Coordinator develops and updates assessments of the requirements for volunteers in the impacted area and undertakes contingency planning to meet anticipated demands and requirements, and coordinates volunteer registration, assignment, and supervision and identifies partner agencies in managing volunteers. The Scott County Volunteer Coordinator may also function as a Donations Manager in a response.

The Scott County **SAFCOM** group is a voluntary unit of the Sheriff's Office - Division of Emergency Management. Under the direction and control of the Scott County Emergency Management Director, the SAFCOM member's traditional mission was to provide weather spotting. These volunteers respond to predesignated locations throughout the county to watch and report dangerous winds, hail, or tornadic activity. The SAFCOM group is also available to supplement other missions as needed, such as sheltering or flood control.

The **Sheriff's Office Reserve Unit** is a group of volunteers that supplements Sheriff's Office operations. In an emergency or preplanned event, the Reserve Unit activates to support a wide variety of disaster response needs.

Medical Reserve Corps (MRC) volunteers include medical and public health professionals, such as physicians, nurses, physician assistants, pharmacists, dentists, veterinarians, and epidemiologists. Many other community members also support the MRC, such as interpreters, chaplains, office workers, and legal advisors.

Key Performance Indicators (KPIs):

- County Staff NIMS trained (KPI 228)
- County Staff trained to EOC Roles (KPI 229)
- Medical Reserve Corps Volunteers Registered to Respond to Public Health Emergencies (KPI for Program 208)

National Standards:

- Public Health Operational Readiness Review
- EMAP
- Emergency Management Gap Analysis of 32 Core Capabilities

Supporting Measure(s):

- National Preparedness Measures
- Threat and Hazard Identification and Risk Assessment (THIRA) - The THIRA helps communities understand their risks and determine the level of capability they need in order to address those risks (page 1). This process lay the foundation for determining a community's capability gaps
- Economic Impact of Emergency Preparedness and Emergency Management volunteers
- Number of employee flu shots given
- Number of People Covered by Closed Points of Dispensing
- Scott County Annual Precipitation
- Mold-Related Requests for Assistance with Nuisance Housing - 2010-2019

- Count of County Staff NIMS Compliant
- Count of EOC Trained Staff
- Provider Training Outreach Pre & Post Test Results
- Impact of Provider Training

What's working well and why?

- Support – at the 2018 Scott County Delivers presentation, it was stated that the THIRA results were not in line with reality. Since that time each, (except the active shooter/hostile event-thankfully), has occurred. The current County Administrator and Deputy County Administrator recognize the need to take incremental steps to improve the resiliency of the county. The approved County Board strategies note emergency management activities.
- Partnership – In the past year, Police, Fire, and EMS personnel have engaged in joint training towards response to an Active Shooter/Hostile Event. Previously each police and fire agency had their own version of response. Now there is a countywide strategy and goal to continue to build a joint response.

Scott County Public Health partnered with Scott County Libraries to staff and operate a mission critical Closed Point of Distribution. They were able to test this through a full-scale exercise in April of 2019. This exercise also included the partnership of local Police and emergency managers.

- Training – Scott County's Senior Leadership team had six meetings this past year focusing on developing senior staff to function in emergency roles.
 - Scott County Public health continues to utilize their partnership with the Scott County Licensing Unit and Libraries by offering trainings for licensed providers and the friend and family network. As a result of their work together this year they will also offer a class to family members of children in childcare settings.
 - Scott County has developed partnerships with our local faith-based organizations and was able to offer a 4-part training series on Emergency Preparedness. The established group hopes to continue meeting annually.
- Communication – Ability to communicate with the entire county has greatly improved in the past few years. Coordination with the Public Information Officer, mass notification systems, social media, IPAWS, has increased our capacity.
- Volunteers - Volunteers fill multiple needs during a disaster. They participate in training and exercises and contribute to operational readiness. Under the work of the county's volunteer coordinator, separate volunteer classifications have been grouped together to provide a wider, more flexible volunteer base. A large group of citizens have signed up to volunteer in a disaster.
- Improvements to Situation Room - The addition of updated radar, mesonet sites, cameras, and weather chat acts as a force multiplier. This has allowed early detection and warning of tornadoes. Camera feeds along highways allows the EOC and 911 Dispatchers to clarify the location and severity of incidents and to see things that may get missed by a passing squad car.
- In March of 2019, Scott County volunteers were used to staff a temporary shelter in Jordan in the immediate hours after the evacuation of Valley Green Trailer Park. Volunteers were also used to staff a pet shelter 24 hours a day for the following five days. The hundreds of hours of donated time provided by these volunteers permitted the county to deliver high quality service in a fiscally responsible manner.

- In 2019, MRC volunteers removed their separate designation of MRC volunteers and are now being referred to as just Scott County Volunteers. While volunteers were always part of the Scott County Volunteers program, the hope is by removing the secondary name it will reduce confusion and streamline registration for volunteers.

What's not working well and why?

- Reliance on some nonprofit partners. For years, we actively worked with a nonprofit to develop and train on setting up a pet shelter in a disaster. The group was tested in our May 2018 full scale exercise. A leadership change occurred sometime after that. In March 2019, we called them in the early phase of the evacuation in Jordan. The group indicated that they had changed their insurance coverage to only operate during a declared disaster. This prohibited them from responding. As the agency having jurisdiction, Scott County is responsible to open a pet shelter whenever a human shelter is opened. This failure was eye opening. Through a lot of extra work, we made it work for a few days. We need to build this capacity before the next disaster.
- There is not a national or statewide standard for measuring Emergency Management performance. The performance measures that exist rely on qualitative analysis not quantitative data. We have a desire to develop Key Performance Indicators (KPIs) that are founded on valid national standards, not just a good feeling. The KPI's should be a valid measurement of how, or if we are changing outcomes.
- Silos - The staff members involved in emergency planning are all located in different buildings and work under different work direction. A good example is that while the Sheriff's Office has paid for a mass notification solution through Code Red and a different division implemented Everbridge. An opportunity for collaboration was missed.
- For emergency planning to be effective, it needs to be integrated in normal business operations, not a plan that is dusted off when a crisis strikes. Scott County needs to have a deep discussion about prioritization and continuity of operations. Emergency Management should also be actively involved in SCALE to ensure wider adoption of Emergency Management principles.
- Disconnect between mandated services and FTE allocation and equipment. Compared to the metro and other surrounding jurisdictions, our funding is the lowest and our staff is the lowest FTE allocation. Lack of staff time to complete plans, conduct training including ICS, making plans operational and exercise them.
- Resource limitations - Emergency Management staff has dedicated over 700 hours towards all phases of the heavy rainfall, rapid melt, and flash flooding event that occurred in March 2019. Within the scope of disasters, this was a very small one. We just met the threshold to get federal assistance. In a larger disaster, capacity would be challenged.
- Lack of preparedness in the County - This area is improving, but still significantly behind. We are not remotely prepared to respond to a large-scale disaster. We complete minimum requirements to maintain grants and write plans to meet mandates. We are not proactive. The planning process needs to focus on actions rather than information. We need to build depth in staffing.
- Community outreach and engagement – Neither time nor funding to focus on engaging citizens in emergency preparedness. Training and awareness could be critical life saving measures during a disaster. We are regularly getting more requests than we can accommodate for community outreach from businesses, religious institutions, and nonprofit organizations like Scouting groups. Since Hurricane Irma, all medical facilities accepting Medicare and Medicaid are required to develop a relationship with their local

Emergency Management agency. Insurance is driving businesses to seek active shooter training. Many of these trainings and meetings occur outside of normal business hours.

- The SCALE philosophy of sharing without billing is not eligible for state or FEMA reimbursement. Equipment shared in disaster response would have been eligible for payment if intergovernmental contracts and mutual aid agreements had been in place.
- Emergency Management is largely funded through grants that are controlled by groups that do not recognize the risks in Scott County.

Next Steps / Future Program Development and why?

- Training of ALL staff on emergency response and Incident Command Structure. A training curriculum is being deployed to all staff as a part of the extended onboarding process. Existing staff are slowly being migrated to NIMS compliance.
- Continued training of the senior leadership team on emergency management principals and disaster operations. The goal of this training is to establish a core group of leaders in the county who are capable of functioning in roles that activate during a crisis. Emergency Management intends to implement EOC role specific training to senior staff and the next tier of staff down over the next five years.
- Once senior staff has completed the foundational NIMS and incident command classes, then learned advanced incident management roles, the county should complete a full scale exercise of these roles. This would bring us to a similar level of training to that in our neighboring counties. Emergency Management is tentatively scheduling this for 2027.
- COOP Plan development - A very basic Continuity of Operations plan was implemented in 2018 to meet requirements. The data collection was distributed instead of integrated due to time and staff capacity limitations. Almost all divisions indicated that if their assigned office space was uninhabitable, they would set up shop at the Regional Training Center. The size of that building is not sufficient for this to occur. This also demonstrates a failure to integrate the whole county in planning. A smarter conversation will be led in the next five years addressing continuity of government, senior staff, buildings, services, technology, and equipment. This will require difficult conversations about what services could be reduced in a crisis.
- Continue community outreach and education to increase the resilience of our residents so they rely less on government aid. We need to synchronize efforts to complete public outreach to eliminate contradictions in messaging that currently occur.
- Develop an organizational plan for Emergency Management in the future. Currently resource requests are competitive between the different departments that have a role in preparedness activities. This siloed approach is ineffective. In the next five years, a business plan will be completed, if an executive sponsor is identified, that would build a united Emergency Management function.
- Pre-disaster contracting - We started a process of developing pre-disaster service contracts. These contracts go in effect before the crisis hits, preventing price gouging. Significant expansion of this project needs to occur in the next two years.
- Operationalize emergency plans – Many of our emergency plans were written to “check a box” to meet grant requirements. Future development of the plans needs to more closely integrate those divisions that will be assigned those duties in a disaster.
- Better training and connection with other business units who would be called upon to support response and recovery. When we have met with departments in the past for

annual approval of the EOP, gaps in understanding have been identified. In the next five years, Emergency Management will continue the process of meeting with impacted departments to identify gaps, then implement solutions. If capacity still remains, the EOP should identify it.

- Disaster role, fiscal, and documentation training – We need to do better at training our partners in cities, townships, and school districts about how to track disaster actions in order to get as much state and federal disaster aid as possible. SCALE provides a perfect framework for implementing this solution.
- Implement the Senior and Elected Officials training program. A multicourse series has been designed to teach senior and elected officials about their role as the policy group in a disaster. The program is designed for commissioners, sheriffs, administrators, city council members, school board members, and tribal government leaders. We had planned to bring it to a County Board workshop starting at the end of 2019 but were unable to do so. In further discussion about this tactic, we identified that the SCALE platform may be a better place to delivery it. The goal is to schedule this program to the county starting in the next two years.
- Emergency Management is seeking a donation to purchase equipment for an initial phase disaster pet shelter. This will provide the capability to establish a pet shelter whenever a human shelter is opened. The scope of this request supports fifty animals. If a larger shelter is needed, regional resources can be called for the second operational period.
- Full Scale Exercise on June 17, 2020 to operationalize our mass dispensing plans.

Explanation of Funding Information

The Priority Based Budgeting (PBB) sheets for programs that relate to the topics covered in this presentation are included in the packet. These profile sheets include both program revenue from outside sources, levy contributions to the program, and program costs. It is important to note that the PBB model includes administrative and management expenses not included in the operating statements as these expenses are allocated across the PBB programs through a standard allocation process. In addition, the program description on the form includes the following:

- Direct: is the total of Personnel costs + Non Personnel costs
- Total: is Direct + Admin
- Personnel: direct program staff allocated to the program and support staff allocated by FTE
- Non Personnel: Any expenses that are not direct staff costs
- Admin: management costs allocated by FTE that may not be reflected in the program operating statement
- Revenue: is program revenue from state, federal or other grant sources
- Levy: is county levy costs associated with the cost of running this program

Resources:

Resource Type	Title	Location
Snapshot	Medical Reserve Corps Volunteers Registered to Respond to Public Health Emergencies	Public Health Performance Measures.xlsx, KPI 208 #18
Snapshot	Employee Influenza Vaccines Given	Public Health Performance Measures.xlsx, 208 b #27
Snapshot	Economic Impact of Emergency Preparedness and Emergency Management Volunteers	Public Health Performance Measures.xlsx, 208 c #28
Snapshot	Number of People Covered by Closed Points of Dispensing	Public Health Performance Measures.xlsx, 208 d #29
Snapshot	Scott County Annual Precipitation	Public Health Measures.xlsx, Precip
Snapshot	Mold-Related Requests for Assistance with Nuisance Housing - 2010-2019	Public Health Measures.xlsx, 208i
Snapshot	County of County Staff NIMS Compliant	Sheriff Performance Measures.xlsx, KPI228
Snapshot	Count of EOC Trained Staff	Sheriff Performance Measures.xlsx, KPI229
Snapshot	Provider Training Outreach Pre & Post Test Results	Public Health Performance Measures.xlsx, 208 g
Snapshot	Impact of Provider Training	Public Health Performance Measures.xlsx, 208h

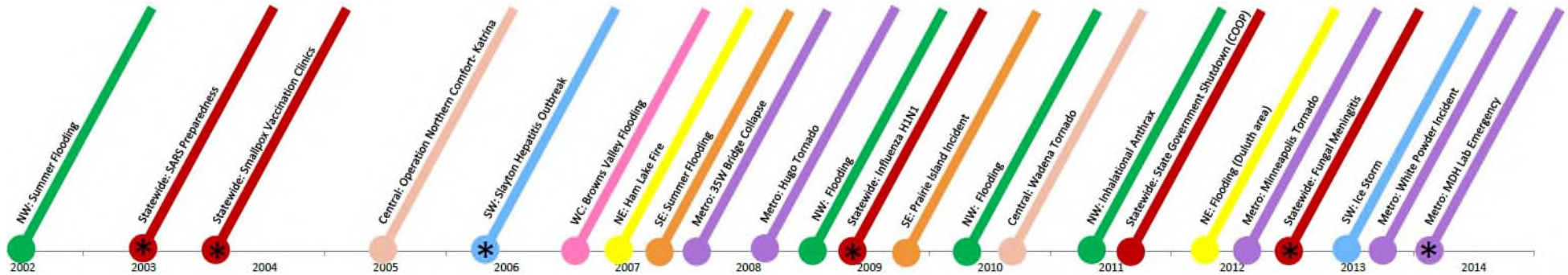
Related Program Profile Sheets:

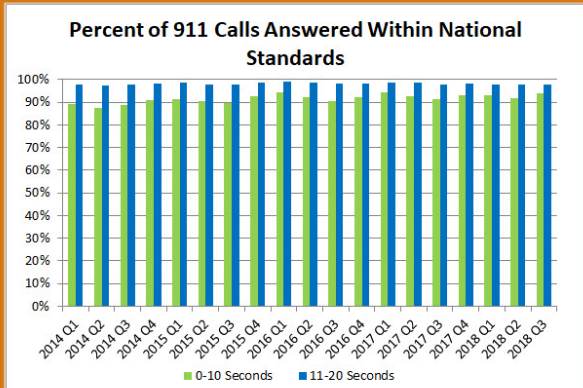
Program Number	Program Name
208	Public Health (PH)-Emergency Preparedness
228	Emergency Management – NIMS Training
229	Emergency Management – EOC level training



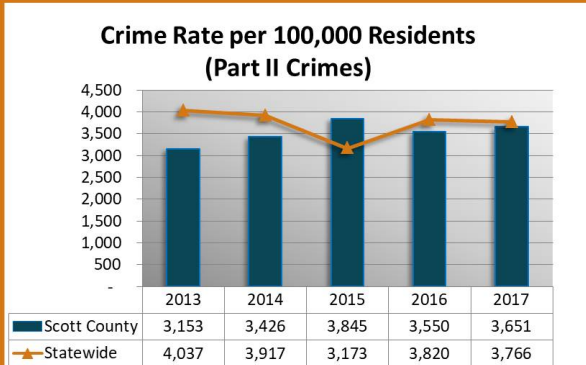
Delivering What Matters

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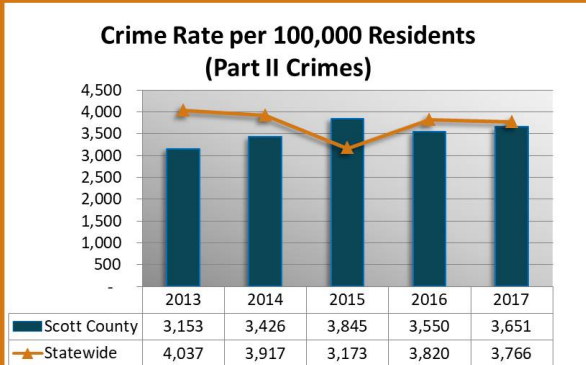


Health and Human Services (HHS)				Public Health (PH)-Emergency Preparedness				Report Date: 1/27/2020			
Public Health				Quartile Rank	1	Program Contact: Lisa Brodsky			Program Number	208	
Description		Assists the county and our community partners in healthcare to be prepared for a variety of large-scale public health emergencies such as a meningitis outbreak, anthrax exposure, or pandemic influenza. In the event of an emergency, Public Health is mandated to respond and assist in recovery operations including distributing life-saving medications, helping families recover from loss, and ensuring the public has needed information. These services are mandated in MS145A, MS 12.33 and MS 144.									
Community Results					Attributes		Community Indicator				
HEALTHY community for all individuals					3	Mandated	4				
HEALTHY community of options to choose from					3	Reliance	4				
LIVABLE community by providing opportunities for culture, leisure and life-long development opportunities					1	Cost Recovery	4				
LIVABLE community by providing mobility options and recreation infrastructure					0	Change In Demand	2				
SAFE community by providing access to a safety net					4	Portion of Community Served	4				
SAFE community by providing protection from threats to safety					4	Program Performance					
						Program Outcome	Citizens are prepared for emergencies and recovery				
Program Finances					FTE	1.21	Key Perfomance Indicators (KPI)	% of needed registered medical reserve corps volunteers available/trained to operate a mass dispensing site			
Cost	2018	2019		2018	2019	KPI Results	In Development				
Total	\$139,369	\$130,705	Revenue	\$132,582	\$130,705	KPI Results Direction	Stable				
Direct	\$132,582	\$130,705	Levy	\$30,442	\$13,202	Factors Impacting KPI Performance	Each year, we lose several volunteers due to moving out of the jurisdiction, retirement and general lack of engagement.				
Personnel	\$119,206	\$120,517	Fees	\$0	\$0	If not meeting or declining - why?	We continue to grow each year. The number grows year even though we have attrition. Working the Cara Madsen in the SC volunteer office has helped to streamline the registration process and assist in the recruitment of				
Non Personnel	\$13,376	\$10,188	Grants	\$102,140	\$117,503						
Admin	\$6,787	\$0	Other Revnue	\$0	\$0						

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Sheriff				Emergency Management - Planning				Report Date: 1/27/2020			
Emergency Management				Quartile Rank	2	Program Contact: Scott Haas			Program Number	228	
Description		Plan, facilitate, and conduct exercises, drills, & training to prepare responders for various emergency scenarios in order to reduce the event's impact on the community. (Minn. Stat. § 12 & Public Law 93-288)									
Community Results					Attributes		Community Indicator				
HEALTHY community for all individuals				2	Mandated	4					
HEALTHY community of options to choose from				1	Reliance	3					
LIVABLE community by providing opportunities for culture, leisure and life-long development opportunities				0	Cost Recovery	3					
LIVABLE community by providing mobility options and recreation infrastructure				0	Change In Demand	0					
SAFE community by providing access to a safety net				2	Portion of Community Served	4					
SAFE community by providing protection from threats to safety				4	Program Performance						
					Program Outcome	Citizens receive structured, consistent response to disasters to minimize personal injury and property damage					
Program Finances				FTE	0.63	Key Perfomance Indicators (KPI)	NIMS compliance rate% of recommended plans completed				
Cost	2018	2019		2018	2019	KPI Results	Not Meeting				
Total	\$100,127	\$102,786	Revenue	\$90,554	\$102,785	KPI Results Direction	Improving				
Direct	\$90,554	\$102,786	Levy	\$39,117	\$52,267	Factors Impacting KPI Performance	FEMA and MN HSEM training standards change yearly. FEMA plan requirements change yearly.				
Personnel	\$74,157	\$81,386	Fees	\$0	\$0	If not meeting or declining - why?	Changeover of division staff over the past years resulted in significant loss of institutional knowledge and loss of tracking mechanism for NIMS training.				
Non Personnel	\$16,397	\$21,400	Grants	\$51,437	\$50,518						
Admin	\$9,573	\$0	Other Revnue	\$0	\$0						

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Sheriff				Emergency Management - Prevention				Report Date: 1/27/2020			
Emergency Management				Quartile Rank	2	Program Contact: Scott Haas			Program Number	229	
Description		Identifying, prioritizing and mitigating threats & hazards to Scott County to prevent an event's impact on the community. (Minn. Stat. § 12 & Public Law 93-288)									
Community Results					Attributes		Community Indicator				
HEALTHY community for all individuals				2	Mandated	4					
HEALTHY community of options to choose from				1	Reliance	3					
LIVABLE community by providing opportunities for culture, leisure and life-long development opportunities				0	Cost Recovery	0					
LIVABLE community by providing mobility options and recreation infrastructure				0	Change In Demand	0					
SAFE community by providing access to a safety net				2	Portion of Community Served	4					
SAFE community by providing protection from threats to safety				4	Program Performance						
					Program Outcome	Scott County residents will not suffer fatalities or injuries as a result of critical incidents					
Program Finances				FTE	0.62	Key Perfomance Indicators (KPI)	% of risk parcels removed from private ownership in 100 year flood areas participation rate in flood insurance				
Cost	2018	2019		2018	2019						
Total	\$126,029	\$125,209	Revenue	\$113,980	\$125,209	KPI Results	Meeting				
Direct	\$113,980	\$125,209	Levy	\$63,206	\$74,691	KPI Results Direction	Stable				
Personnel	\$74,157	\$81,231	Fees	\$0	\$0						
Non Personnel	\$39,823	\$43,978	Grants	\$50,774	\$50,518	Factors Impacting KPI Performance	Buyout of properties relies upon funding. Availability of Federal Hazard Mitigation Grants is based on dollar value of federally declared disasters in Minnesota.				
Admin	\$12,049	\$0	Other Revnue	\$0	\$0	If not meeting or declining - why?					Page 16



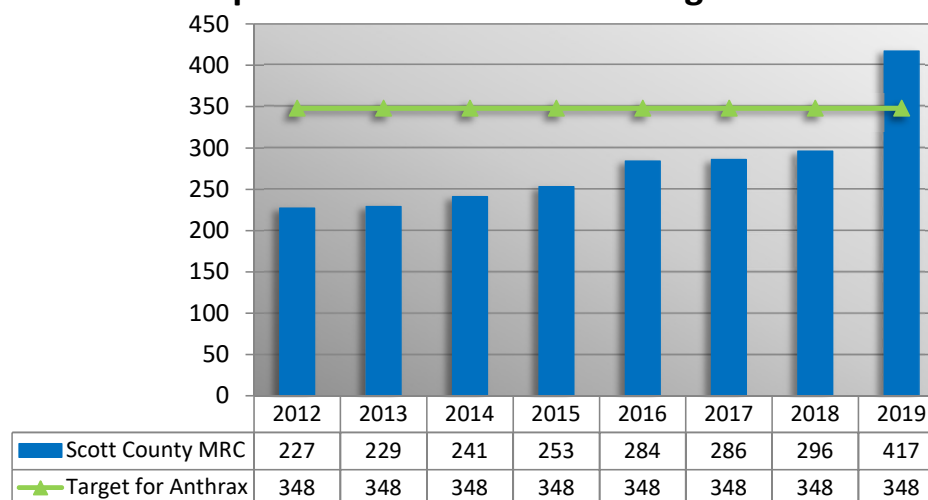
Delivering What Matters Public Health



About this measure:

The MRC was established to provide a way to recruit, and train volunteers to respond to public health needs, including disasters and other emergencies. MRC volunteers actively contribute to making Scott County a safe and livable community. Scott County MRC volunteers are screened, registered and offered ongoing training opportunities.

Medical Reserve Corps Volunteers Registered to Respond to Public Health Emergencies



Source: Minnesota Responds

Why does this matter?

In a large scale public health emergency, Public Health would need additional help through volunteers. In some cases, such as anthrax exposure, immediate treatment is critical to ensure the greatest chances of survival. In Scott County, to ensure we could distribute medications to the county population in the targeted time, we would need 348 volunteers every 24 hours. These volunteers would staff our pre-identified public open points of distribution. The county volunteers would supplement the MRC to ensure staffing needs will be met. In 2019 MRC volunteers were no longer kept in a separate volunteer database; the merge and reduction in duplication allowed us to expand our volunteer pool. Volunteers are now categorized as emergency response volunteers by Scott County Volunteers.



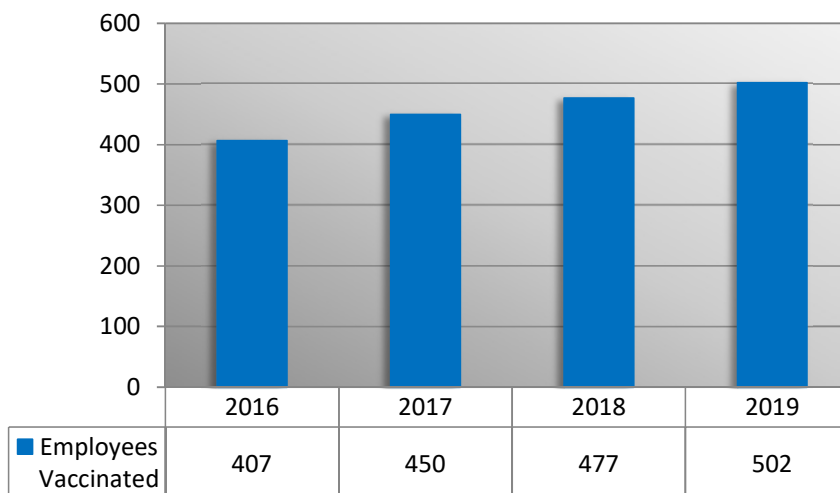
Delivering What Matters Public Health



About this measure:

Employee flu shots are done annually for employees and their family members covered by the County health plan. Since 2016, the large vaccination clinics have been held in partnership with Public Health and Employee Relations. These clinics not only benefit the employee, but also count as Public Health exercises, meeting grant deliverables.

Employee Influenza Vaccines Given



Source: Flu Clinic Data

Why does this matter?

Since 2016, large employee vaccination clinics have been conducted, completing large numbers of influenza vaccination in a short time period. The attendance at these clinics has grown over 3 years by 17%. Utilizing Incident Command, Public Health Nurses from a variety of county departments complete vaccinations in an efficient manner and keep current their injection skills. Children of employees can be vaccinated as well creating a one-stop-shop for many families and creating a healthy home so caregivers do not have to leave work to take care of sick. Increased immunity to influenza is crucial in Scott County's COOP (continuity of operations) plan. Vaccines contribute to herd immunity in large employee settings.



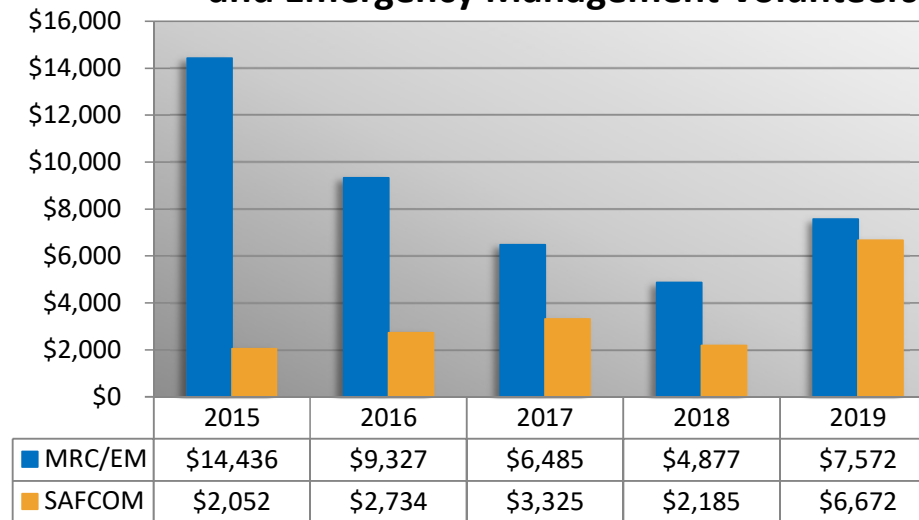
Delivering What Matters Public Health/Emergency Mgmt



About this measure:

The Medical Reserve Corps (MRC) of Scott County is a countywide resource of health professionals and other professionals who volunteer and strengthen the community by preparing for and responding to local public health emergencies and assisting in ongoing public health initiatives. Safety Communications (SAFCOM) is a group of Scott County Volunteers who assist with weather spotting, call center/hotline, sandbag operations, and evacuations.

Economic Impact of Emergency Preparedness and Emergency Management Volunteers



Source: Medical Reserve Corps Data 2015-2018, SAFCOM Data 2015-2018, Betterimpact 2019

Why does this matter?

Local volunteers contribute their skills and expertise throughout the year as well as during times of community need. Volunteer's professional knowledge and skills are vital to the communities, families, friends and neighborhoods of Scott County, in a time of need. Volunteers can help Scott County in its goal to have Safe, Healthy, and Livable Communities.

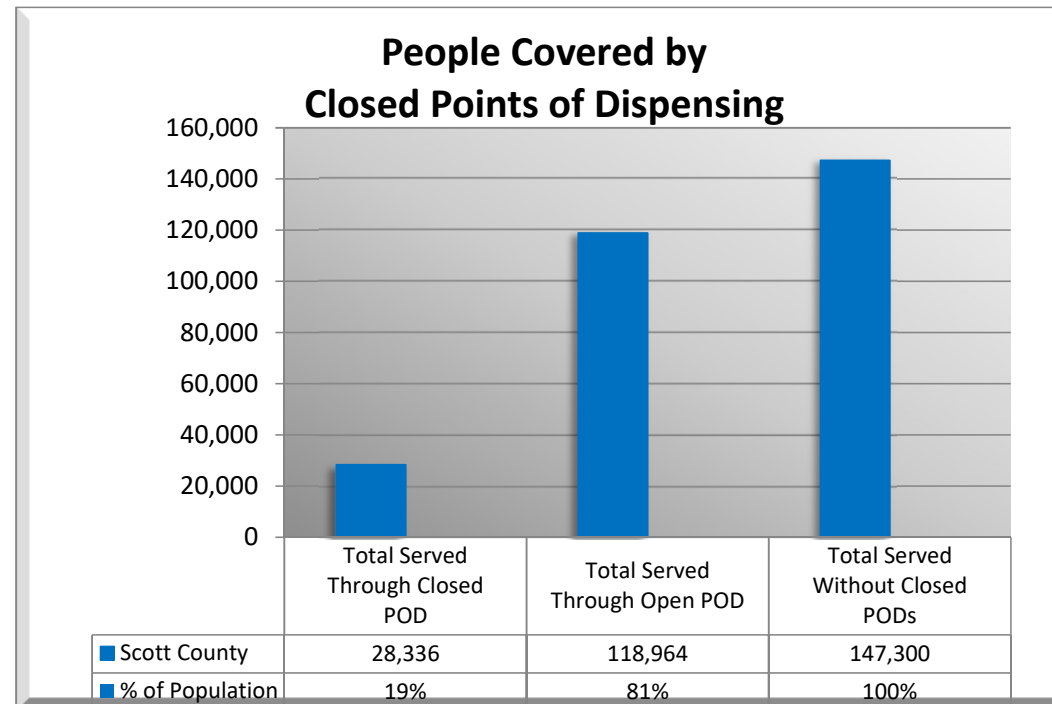


Delivering What Matters Public Health



About this measure:

Currently, 24,836 people in Scott County are covered by a Closed Point of Dispensing (POD) agreement with the remaining 118,964 individuals to be served through an Open POD within 36 hours in the event of an anthrax attack. A POD could be used to distribute other items and medical countermeasures such as vaccine.



Source: Closed POD Registration Forms

Why does this matter?

A Closed Point of Dispensing (POD) Site is a location that is operated by a private organization for a target group which may include employees and their families and/or clients/members they serve. Closed PODs are not open to the public. Closed PODs will play a very important role in a public health emergency that requires getting medications to the entire population very quickly. This strategy increases self-sufficiency during a public health emergency. The use of Closed PODs in a HCID (highly infectious contagious disease) would reduce the requirement of an Open POD by 24 hours of operation and greatly reduce reliance on County resources.

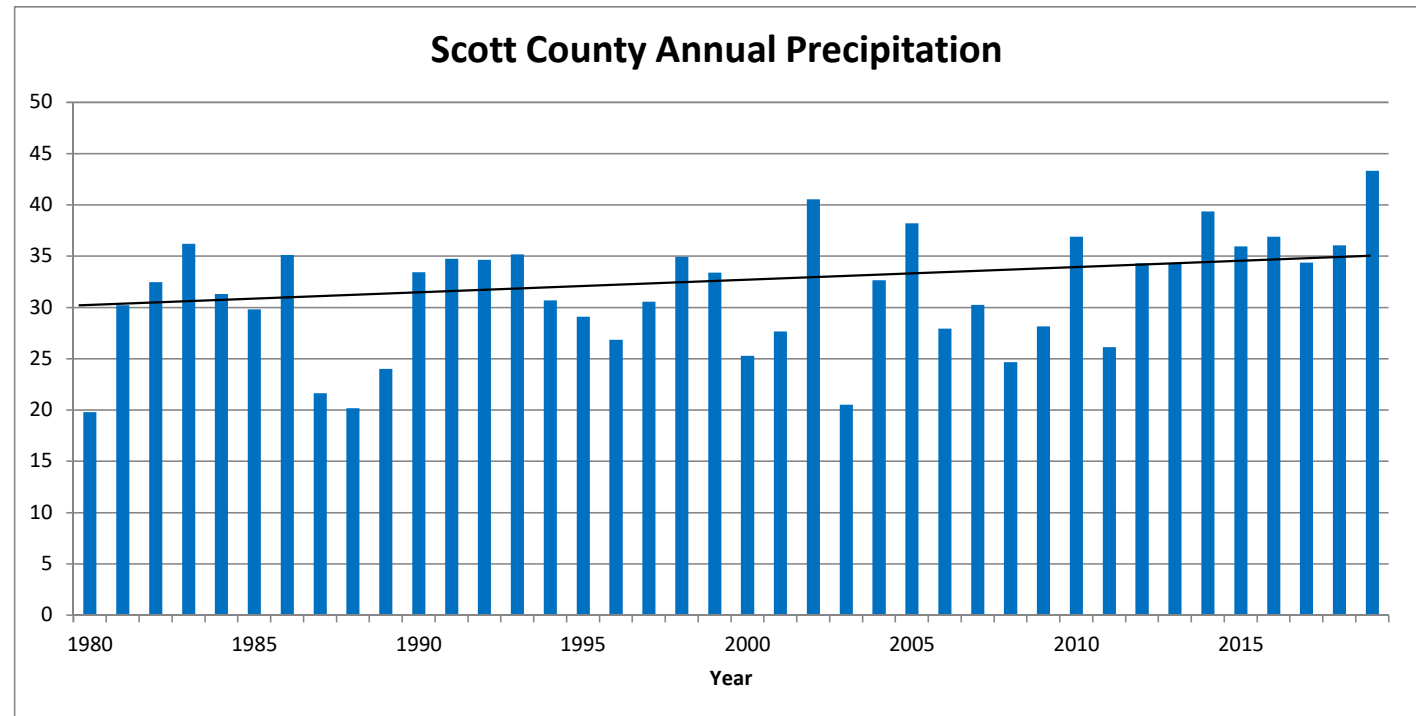


Delivering What Matters Community Services



About this measure:

This measure tracks precipitation over time. The Minnesota State Climatology Office records annual precipitation across the state of Minnesota. This data is extracted based off the closest rain gauge to any given point in the state.



Source: Minnesota State Climatology Office

Why does this matter?

The amount and intensity of precipitation strongly influences the watershed, the amount of flooding, erosion, public perception of problems, and the effectiveness of conservation practices. It also impacts the effects to the public's health. Understanding the rainfall is important for interpreting hydrologic or water quality indicators. Overtime, annual precipitation has increased.



Delivering What Matters Public Health

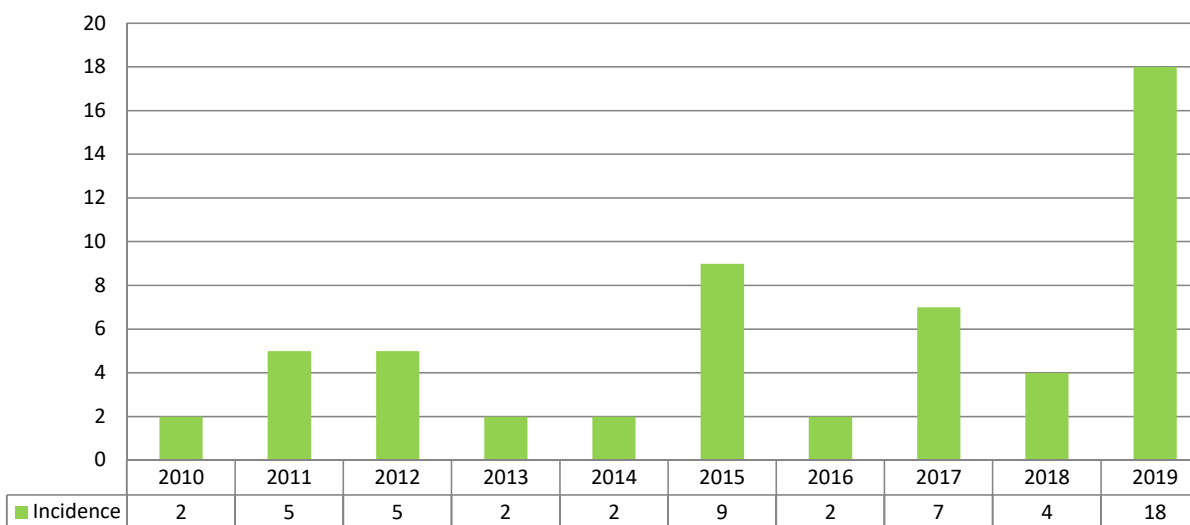


About this measure:

All calls for assistance related to public health nuisances are tracked by type of incident.

Public Health provides a home visit with assessment of the issue and provides information on how to eliminate the source of the mold. Typically, the issue is related to moisture.

Mold-Related Requests for Assistance with Nuisance Housing - 2010-2019



Source: Carefacts database

Why does this matter?

Health effects from mold can vary greatly from person to person. Common symptoms can include coughing, runny nose, wheezing and sore throat. People with asthma or allergies may notice their symptoms worsen. Calls for incidence typically increase as precipitation in the county increases.



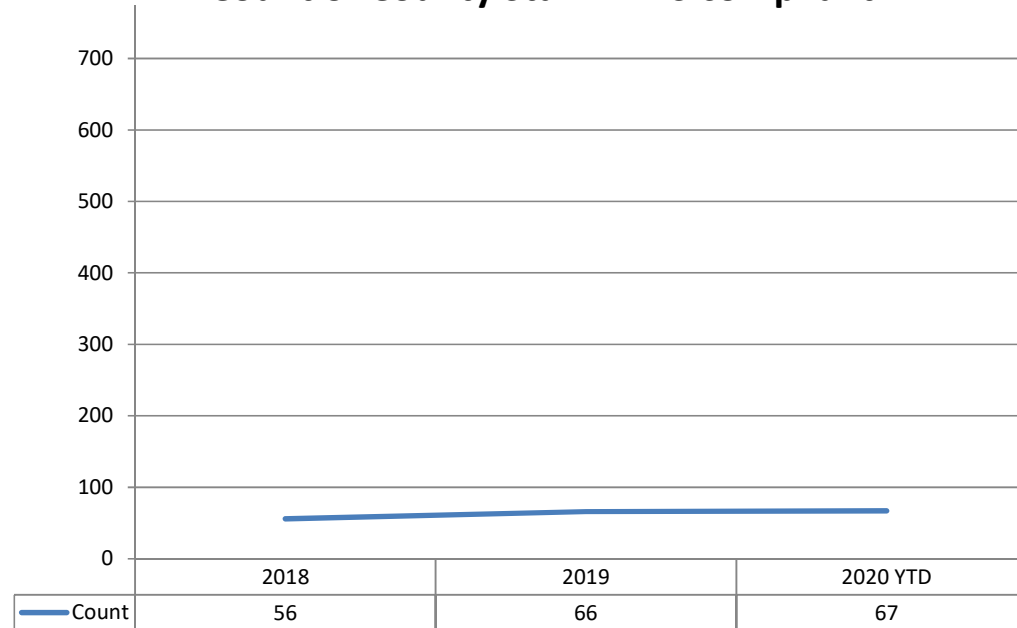
Delivering What Matters Sheriff's Office



About this measure:

This measure compares the number of staff with certificates on file for FEMA's IS 100, 700, and 200 courses. These are the foundational courses required for any employee who may function in the incident command system during an incident or event. With incidents ranging from natural hazards, bio incidents, and cyber incidents, all departments in the county are impacted in some phase of a response or recovery, all county employees should have this training.

Count of County Staff NIMS compliant



Source: Emergency Management Records

Why does this matter?

Emergencies and disasters come in many forms and can impact staff from across the organization. While natural hazards remain the most common occurrence, a recent cyber incident shows how incidents may be managed by those in nontraditional roles. The effectiveness of staff to respond to and recover from disasters impacts the long term viability of Scott County residents.



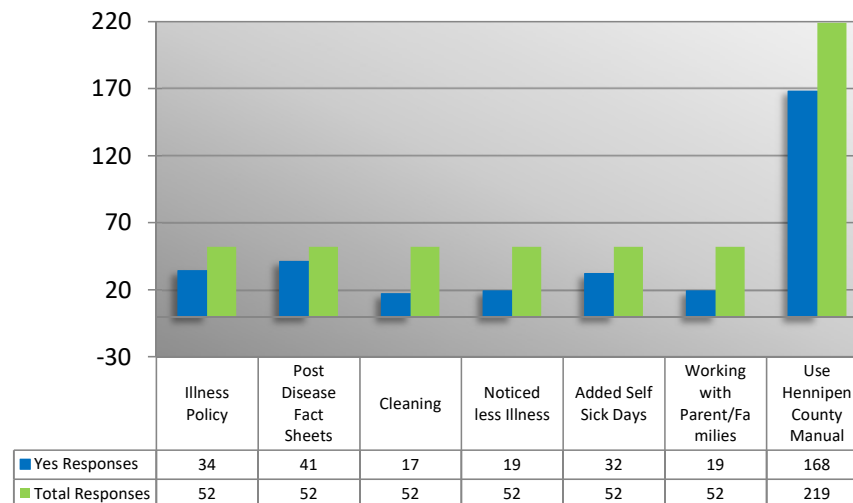
Delivering What Matters Public Health



About this measure:

In 2018 the Emergency Preparedness staff taught seven classes in four cities to Childcare and Fostercare providers on seven infectious diseases. The focus was on awareness, prevention, and control. 219 or 52% of providers in Scott County participated in the trainings. Three to six months following the trainings - Scott County sent a survey to learn more about the changes that were made by providers as a result of the training.

Changes as a result of Provider Training



Source: Providers Class Evaluation and 3/6 Month evaluation

Why does this matter?

299 – Licensed Family Child Care = 3502 children
 39 Childcare Centers = 3649 children
 15 Licensed Adult Foster Care Providers = 41 children
 72 Child Foster Care = 163 children
 Total = 7,355 clients being provided care
 Households 7,355 X 2.5 = 18,387.5 (52% = 9,561)
 Households 9,561 potential reach



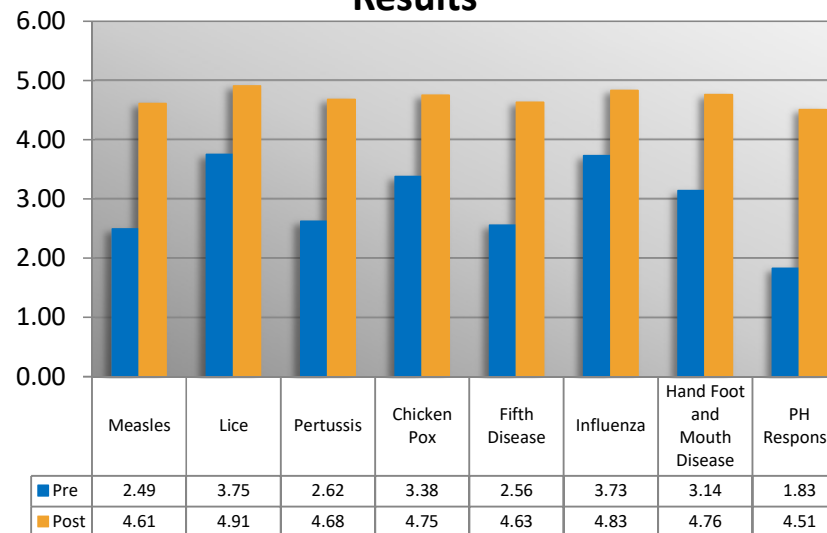
Delivering What Matters Public Health



About this measure:

In 2018 the Emergency Preparedness staff taught seven classes in four cities to Childcare and Foster care providers on seven infectious diseases. The focus was on awareness, prevention, and control. 219 or 52% of providers in Scott County participated in the trainings. Classes were taught in English and Spanish.

Provider Training Outreach Pre & Post Test Results



Source: Childcare Class Pre and Post Test

Why does this matter?

The increased knowledge of these seven diseases and how the recognition of a disease can help a public health response helps to increase the providers ability to prevent, treat, and control an infectious disease. The recognition of a disease is the first step in controlling, treating, and preventing the further spread of a disease.

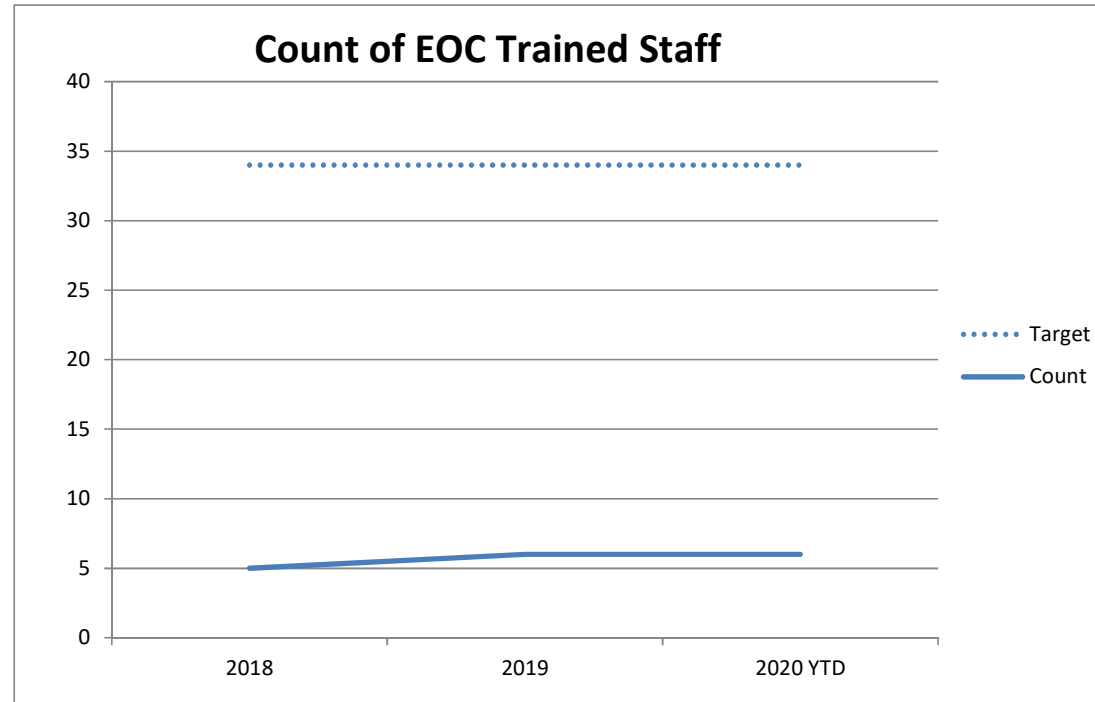


Delivering What Matters Sheriff's Office



About this measure:

This measure identifies the number of county staff members who have the knowledge, skills, and abilities to perform a role in the county's Emergency Operations Center. During a disaster, each EOC staffing position must be occupied by a competent person. This requires 16 people at a time for full activation. We must have plans to staff two operational periods per day.



Source: Emergency Management Records

Why does this matter?

Scott County's Emergency Operations Center (EOC) will activate in the event of a large disaster or event. The primary roles of the EOC are to centralize planning, logistics, and finance functions of a disaster. By providing centralized procurement and tracking, the EOC promotes effective coordination, allocation, and tracking of a large number of resources. If this function is not completed well, or if staff is not trained to fill roles in the EOC, the disaster response will be less efficient. The likelihood of obtaining disaster aid is also reduced.